## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/5/19380

| CLAIMS AS FILED - PART I  (Column 1) (Column 2)  |   |   |   |                                     |              |                                       |      | SMALL ENTITY TYPE |                        | OR  | OTHER THAN<br>SMALL ENTITY |                            |  |
|--|---|---|---|-------------------------------------|--------------|---------------------------------------|------|-------------------|------------------------|-----|----------------------------|----------------------------|--|
| u.s  | i. NATIONAL   | STAGE FEES                                |   |                                     |              |                                       |      | RATE              | FEE                    | 1   | RATE                       | FEE                        |  |
| BAS  | SIC FEE   |   | SMALL ENT                                 | Г. = \$ 150                         | LARC         | GE ENT. = \$ 300                      | ВА   | SIC FEE           | 150                    | OR  | BASIC FEE                  |                            |  |
| EXA  | AMINATION FE  | £E  | Satisfies PCT A<br>(4) = \$50             | 0/\$100                             | \$           | other situations =<br>\$ 100 / \$ 200 | EX   | AM. FEE           | 260                    | 1 ' | EXAM. FEE                  |                            |  |
| SEA  | ARCH FEE  |   | U.S. is ISA = \$ ALL other co \$ 200 / \$ | ountries =                          | All oth      | ther situations = \$ 250 / \$ 500     | SE   | ARCH FEE          | 250                    |     | SEARCH FEE                 |                            |  |
| FEE  | E FOR EXTRA S   | SPEC. PGS.                                | min                                       | nus 100 =                           |              | / 50 =                                | L×   | <b>(\$125=</b>    |                        | '   | X \$ 250 =                 |                            |  |
| тот  | TAL CHARGEA   | BLE CLAIMS                                | 30mi                                      | inus 20 =                           | *            | Wo_                                   |      | X \$ 25 =         | 400                    | OR  | X \$ 50 =                  |                            |  |
| INDI   | EPENDENT CL   | AIMS                                      |   | minus 3 =                           | *            |                                       | ×    | (\$ 100 =         |                        | OR  | X \$ 200 =                 |                            |  |
| MUL  | TIPLE DEPEN   | IDENT CLAIM PRE                           | ESENT                                     |                                     |              |                                       | +    | - \$ 180 =        | 1000                   | OR  | + \$ 360 =                 |                            |  |
| * If the difference in column 1 is less than zer |   |   |   | o, enter "0                         | )" in co     | olumn 2                               | ·    | TOTAL             | 400                    | OR  | TOTAL                      |                            |  |
|  | CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3) |   |   |                                     |              |                                       | . ,— | SMALL ENTITY      |                        |     |                            | OTHER THAN<br>SMALL ENTITY |  |
| ENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |   | HIGHE<br>NUMB<br>PREVIO<br>PAID F   | BER<br>OUSLY | PRESENT<br>EXTRA                      |      | RATE              | ADDI-<br>TIONAL<br>FEE |     | RATE                       | ADDI-<br>TIONAL<br>FEE     |  |
| AMENDMENT  | Total   | *   | Minus                                     | **                                  |              | =                                     | ×    | K \$ 25 =         |                        | OR  | X \$ 50 =                  |                            |  |
| AME  | Independent   | *   | Minus                                     | ***                                 |              | =                                     | X    | \$ 100 =          |                        | OR  | X \$ 200 =                 | İ                          |  |
|  | FIRST PRES  | SENTATION OF M                            | IULTIPLE DEP                              | ENDENT C                            | CLAIM        |                                       |      | \$ 180 =          |                        | OR  | + \$ 360 =                 |                            |  |
|  |   |   |   | -                                   |              |                                       | . TO | TAL ADDIT.<br>FEE |                        | OR  | TOTAL ADDIT.<br>FEE        |                            |  |
|  |   | (Column 1)                                |   | (Colum                              |              | (Column 3)                            |      |                   |                        |     |                            |                            |  |
| NT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |   | HIGHE<br>NUMBI<br>PREVIOL<br>PAID F | BER<br>DUSLY | PRESENT<br>EXTRA                      |      | RATE              | ADDI-<br>TIONAL<br>FEE |     | RATE                       | ADDI-<br>TIONAL<br>FEE     |  |
| AMENDMENT B                                      | Total   | *   | Minus                                     | **                                  |              | =                                     | X    | ( \$ 25 =         |                        | OR  | X \$ 50 =                  |                            |  |
| AMEN   | Independent   | *   | Minus                                     | ***                                 |              | =                                     | X    | \$ 100 =          |                        | OR  | X \$ 200 =                 |                            |  |
|  | FIRST PRES  | SENTATION OF MU                           | ULTIPLE DEPF                              | ENDENT C                            | LAIM         |                                       | +    | \$ 180 =          |                        | OR  | + \$ 360 =                 |                            |  |
|  |   |   | -   | ,                                   |              |                                       | TOT  | TAL ADDIT.<br>FEE |                        | ÒR  | TOTAL ADDIT.<br>FEE        |                            |  |
|  |   |   |   | •                                   |              |                                       |      |                   |                        |     |                            |                            |  |

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.